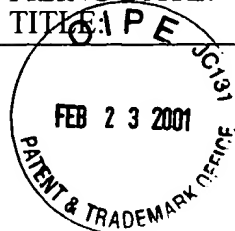


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UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: RODRIGUEZ ET AL. GRP. ART UNIT: 2611
APPL. NO.: 09/693,780 EXAMINER: NOT ASSIGNED
FILING DATE: OCTOBER 20, 2000 DOCKET NO.: A-6694
TITLE: SYNCHRONIZED VIDEO-ON-DEMAND SUPPLEMENTS
FEBRUARY 15, 2001



**TRANSMITTAL OF REQUEST FOR
CORRECTION OF FILING RECEIPT**

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Office of Initial Patent Examination
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Sir:

Transmitted herewith for filing in the above-identified patent application, please find:

1. ☒ Request for Correction of Filing Receipt with transmittal (in duplicate)
2. ☒ Copy of Filing Receipt with errors marked in red
3. ☒ Return Postcard

Please charge the fee under 37 CFR 1.19 (h) in the amount of \$25.00 to Deposit Account No. 19-0761. A duplicate original of this sheet is enclosed.

Respectfully submitted:

SEND CORRESPONDENCE TO:

Scientific-Atlanta, Inc.
Intellectual Property Dept. MS 4.3.518
5030 Sugarloaf Parkway
Lawrenceville GA 30044

By: Kelly A. Gardner
KELLY A. GARDNER
Attorney of Record
Reg. No.: 35,147
Phone: (770) 236-7866
Fax No.: (770) 236-4806

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Marcia Burdick
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REQUEST FOR CORRECTION OF FILING RECEIPT

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Washington, DC 20231

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For Continuing Data as Claimed by Applicant, after "6/11/1999" insert --and 60/170,302 12/13/1999 and claims benefit of 60/214,987 6/29/2000.--

Respectfully submitted:

SEND CORRESPONDENCE TO:

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Intellectual Property Dept. MS 4.3.518
5030 Sugarloaf Parkway
Lawrenceville GA 30044

By: Kelly A. Gardner
KELLY A. GARDNER
Attorney of Record
Reg. No.: 35,147
Phone: (770) 236-7866
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Marcia Burdick
Marcia Burdick



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WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/693,780	10/20/2000	2611	1118	A-6694	11	31	4

5642
SCIENTIFIC-ATLANTA, INC.
INTELLECTUAL PROPERTY DEPARTMENT
5030 SUGARLOAF PARKWAY
LAWRENCEVILLE, GA 30044



FILING RECEIPT



OC000000005741516

Date Mailed: 02/07/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

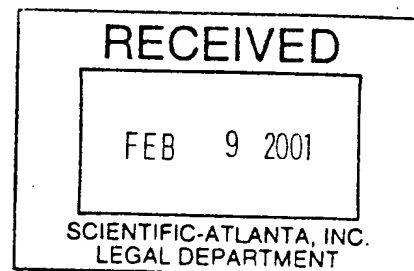
Arturo A. Rodriguez, Norcross, GA ;
Dean F. Jerding, Roswell, GA ;
Robert O. Banker, Cumming, GA ;

Continuing Data as Claimed by Applicant

THIS APPLICATION IS A CIP OF 09/590,520 06/09/2000
WHICH CLAIMS BENEFIT OF 60/138,756 06/11/1999

and 60/170,302 12/13/1999 and Claims Benefit of

Foreign Applications 60/214,987 6/29/2000



If Required, Foreign Filing License Granted 12/15/2000

Title

Synchronized video-on-demand supplements

Preliminary Class

348

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Data entry by : WYATT, DEBRA

Team : OIPE

Date: 02/07/2001





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Bib Data Sheet

CONFIRMATION NO. 8562

SERIAL NUMBER 09/693,780	FILING DATE 10/20/2000 RULE	CLASS 348	GROUP ART UNIT 2611	ATTORNEY DOCKET NO. A-6694
APPLICANTS Arturo A. Rodriguez, Norcross, GA; Dean F. Jerding, Roswell, GA; Robert O. Banker, Cumming, GA;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/590,520 06/09/2000 WHICH CLAIMS BENEFIT OF 60/138,756 06/11/1999 AND CLAIMS BENEFIT OF 60/170,302 12/13/1999 AND CLAIMS BENEFIT OF 60/214,987 06/29/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/15/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY GA	SHEETS DRAWING 11	TOTAL CLAIMS 31
INDEPENDENT CLAIMS 4				
ADDRESS 5642				
TITLE Synchronized video-on-demand supplements				
FILING FEE RECEIVED 1118	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	